Complete and send this form, together was applicable fee(s), to: Mail Mail Stop ISSU EE

Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

or <u>Fax</u> (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required)

appropriate. All further indicated unless correct maintenance fee notifica	correspondence includi ed below or directed ot	ng the Pa	atent, advance on Block 1, by (a) specifying a new corre	maintenance fees verspondence address	will be m ; and/or	nailed to the current (b) indicating a sepa	correspondence address as arate "FEE ADDRESS" for
CURRENT CORRESPOND	ry change of address)	ree	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.					
GREENBLUM & BERNSTEIN, P.L.C. 1950 ROLAND CLARKE PLACE RESTON, VA 20191					Cer	rtificate (of Mailing or Trans	•
		THAT & TRAPE	WENT?				(Depositor's name)	
			-				(Signature)	
A DOLLO TOOL NO	T FIND DIFF			RST NAMED INVENTOR ATTORNEY			(Date)	
APPLICATION NO.		FILING DATE				ATTORNEY DOCKET NO.		CONFIRMATION NO.
10/521,460 01/28/2005 Mitsuru Chiba P26589 8495 TTTLE OF INVENTION: LIQUID BAG, LIQUID BAG MOUTH MEMBER, AND METHOD OF PRODUCING THE SAME								
APPLN. TYPE	SMALL ENTITY	TITY ISSUE FEE DUE		PUBLICATION FEE DUE	PREV. PAID ISSUI	E FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	NO \$140		\$300	\$0 \$1700		\$1700	01/25/2007
EXAMINER			RT UNIT	CLASS-SUBCLASS	SS			. :
BUSHEY, C	HARLES S	1724	261-122100					
1. Change of correspondence address or indication of "Fee Address" (37 2. For printing on the patent front page, list 1. Cherentel I. M. & Depuision of "Fee Address" (37) 2. For printing on the patent front page, list								
Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.				(1) the names of up to 3 registered patent attorneys or agents OR, alternatively, P.L.C.				
PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.				(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is 3 listed, no name will be printed.				
B. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)								
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.								
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OF COUNTRY) TED2 00000056 10521460								
SENKO MEDICAL INSTRUMENT MIG. CO., LTD. Tokyo, JAPAN C:1501								
12 FC:1504 300.00 OP Please check the appropriate assignee category of categories (wift not be printed on the patent): Individual Corporation or other private group entity Corporation or other private group entity of the patent of the pa								
a. The following fee(s) are submitted: 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed.								
Publication Fee (No small entity discount permitted) The Payment by credit card. Form PTO-2038 is attached.								
Advance Order - # of Copies 10 The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 19_0089 (enclose an extra copy of this form).								
	us (from status indicated	-,			·		0003_ (one copy of the formy.
	SMALL ENTITY statu			☐ b. Applicant is no long	er claiming SMAL	L ENTIT	Y status. See 37 CF	R 1.27(g)(2).
NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United Status Patent and Frademark Office.								
Authorized Signature Arnold Turk Date 1/17/07								
Typed or printed name	Bruce H. Be	rnste	in	Reg. No. (33094 Registration No	o. <u>29</u>	,027	·
his collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and abmitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete								

this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.